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APPLICATION FOR EMPLOYMENT

We are an Equal Opportunity Employer.
 All applicants will be considered without regard to their age, race, creed, color, disability, marital status, sex, national origin, or other legally protected status.



DATE				We put the power in your hands.			
NAME (LAST)		FIRST		M.I.			
ADDRESS		CITY		STATE		ZIP	
HOW LONG HAVE YOU LIVED AT THIS ADDRESS?		PHONE NUMBER H () C ()		REFERRED BY			

EMPLOYMENT DESIRED

POSITION		DATE YOU CAN START		DESIRED SALARY	
ARE YOU CURRENTLY EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF SO, MAY WE CONTACT YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO			
HAVE YOU EVER APPLIED WITH THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO		WHEN?			

EDUCATION HISTORY

PLEASE LIST ALL SCHOOLS AND OR PROFESSIONAL TRAINING (ATTACH ADDITIONAL PAGES IF NECESSARY)		YEARS ATTENDED	SUBJECTS STUDIED	GRADE POINT AVERAGE
HIGH SCHOOL				
COLLEGES				
TRADE, BUSINESS, CORRESPONDENCE SCHOOLS OR OTHER TRAINING				

FORMER EMPLOYERS (PLEASE LIST EMPLOYMENT INFORMATION FOR AT LEAST THE PAST 10 YEARS – ATTACH ADDITIONAL PAGES IF NECESSARY)

NAME & ADDRESS OF EMPLOYER (INCLUDE PHONE NUMBER)	DATES OF EMPLOYMENT MONTH AND YEAR	WAGE RATE	POSITION	REASON FOR LEAVING
	FROM			
	TO			
	FROM			
	TO			
	FROM			
	TO			

REFERENCES – PLEASE NAME THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE (1) YEAR.
REFERENCES FROM PEOPLE WITH KNOWLEDGE OF YOUR WORK ABILITY ARE PREFERRED.

NAME	ADDRESS AND PHONE NUMBER	BUSINESS	YEARS KNOWN

PLEASE LIST ALL LICENSES OR CERTIFICATES HELD OR OTHER SKILLS APPLICABLE TO THE JOB BEING APPLIED FOR:

Are you able to work nights? YES NO Weekends? YES NO Swing shift? YES NO

Are you legally entitled to work in the United States? YES NO

Are you willing to travel if the job requires it? YES NO

Have you ever been terminated or fired from any job? YES NO

If yes, please attach an explanation including the date, the identity of the employer and the reason(s) given for termination.

Have you ever been disciplined (either formally or informally) by any employer? YES NO

If yes, please attach an explanation including the date, the identity of the employer, the type of discipline, and the circumstances surrounding the discipline.

Have you ever been convicted of or plead guilty to any offense (including, but not limited to, felonies, misdemeanors, ordinance violations, civil forfeiture, or other traffic violations) except for minor traffic violations? YES NO

If yes, please attach an explanation including the nature of the offense, the date of the offense, the sentence and the circumstances surrounding the event. You are not required to disclose any sealed or expunged records. Disclosure of criminal convictions does not automatically disqualify you from employment.

PLEASE DESCRIBE WHY YOU WANT TO WORK FOR US:

ACKNOWLEDGEMENTS AND AUTHORIZATIONS

I certify that all my answers in this Application are true and complete. I understand that this employer may refuse to hire me or terminate my employment if I make any false or incomplete statements on this Application.

I authorize this employer to investigate all statements made on this Application. I also authorize the references and past employers listed above to release any and all information concerning my previous employment to this employer and I release the references, past employers and this employer from all liability or loss that may result from the disclosure or use of such information.

I understand that if I am hired my employment will be on an "at-will" basis, meaning that either I or my employer can end my employment at any time, with or without notice and with or without any cause or reason, and that no one has the authority to alter this or create any contract unless in writing signed by the president of this employer.

I consent to any pre-employment physicals or drug testing that is required of this employer. I further agree that this employer may obtain a copy of my driving record.

I further represent that I am not legally restricted in any manner from being employed by this employer.

DATE _____ SIGNATURE _____